

# In the Supreme Court of the State of Alaska

**Marjorie Labriola,**  
Petitioner,  
  
v.  
  
**State of Alaska,**  
Respondent.

Supreme Court No. **S-17534**

**Notice of Intent  
to Appellant to  
Enter Judgment For Cost of  
Appointed Attorney  
Appellate Rule 209(b)**

Date of Notice: **11/26/19**

Trial Court Case No. **3PA-14-01713CI**

Unless you or the prosecutor objects by **1/10/20** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Petition for Sentence Review	\$ 250	\$ 500
Petition for Review	500	1,000
<b>Petition for Hearing</b>	500	<b>1,000</b>
Original Application	500	1,000

\_\_\_\_\_  
Beth A. Pechota, Deputy Clerk

Mailed to Appellant at: 352 East Blueberry Dr., #21  
Palmer AK 99645

**Distribution:**

Mail:  
Weiner, Jason A., OPA - Contract  
Black, Ann B

# In the Supreme Court of the State of Alaska

**Marjorie Labriola,**

Petitioner,

v.

**State of Alaska,**

Respondent.

Supreme Court No. **S-17534**

## **Opposition to Entry of Judgment For Cost of Appointed Attorney**

Date of Notice: **11/26/19**

Trial Court Case No. 3PA-14-01713CI

I oppose the entry of the proposed judgment against me for the cost of appointed attorney for the following reason(s):

- ☐ My conviction was reversed on appeal.
- ☐ I filed the following type of action, but the clerk or court assessed the wrong amount for this action:
  - ☐ Petition for Hearing
  - ☐ Petition for Review
  - ☐ Petition for Sentence Review
  - ☐ Original Application
- ☐ The clerk or court is proposing to enter more than one judgment against me. This is not correct because all of my offenses were resolved in one court proceeding.
- ☐ I should be assessed less than the scheduled amount because my attorney spent only \_\_\_\_ hours on my case. (If you check this box, you must attach a statement from your attorney showing the hours spent on your case.)
- ☐ Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Appellant/Petitioner's Daytime Phone

\_\_\_\_\_  
Appellant/Petitioner's Signature

\_\_\_\_\_  
Appellant/Petitioner's Mailing Address    City                      State                      Zip

Mailed to State's Attorney on: \_\_\_\_\_ (Date)